



Waiting time and satisfaction of outpatient in the pharmacy section

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Abstract

Background: Waiting time for pharmaceutical services, especially outpatients, had become a problem often occurring in hospitals. The correlation between patient expectations and satisfaction level is high, and patient expectations are important to be recognized. The purpose of this paper was to find out whether drug waiting time has a relationship with patient satisfaction in the pharmaceutical department, especially for the outpatients.

Methods: This was a cross sectional study combined with questionnaires distributed to outpatients in the outpatient pharmacy department. The data were presented in the form of descriptive data with a total of 1338 patient respondents and observations for 3 months.

Results: There was an increase in patient satisfaction in the outpatient pharmacy department regarding the waiting time of the drug, followed by several other factors, including pharmacists' compliance in explaining the procedures for the use of medications prescribed by doctors. The number of patients who transacted in outpatient pharmacy was increase, indicating the patients' trust or loyalty to the pharmaceutical installation at Siloam Hospital in Surabaya.

Conclusion: There was an increase in patient satisfaction in the outpatient pharmacy department.

Keywords: outpatient department, pharmacy section, satisfaction

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INTRODUCTION

Waiting time of medicine in outpatient pharmacy is a problem often occurring in hospitals (Ndukwe et al. 2011). This can trigger many complaints from patients who want to get medications quickly so they can go home and take the medication. The correlation between patient expectations and satisfaction level is high, and patient expectations are important to be (Hall et al. 1988, Wandebori 2017). According to the Indonesia Minister of Health regulation 129 of 2008, about minimum standards of hospital service, that the waiting time of general prescription service is ≤30 minutes, whereas the waiting time for compounding prescription is ≤60 minutes (Kementerian Kesehatan 2008). With the determination of the time and also the improvement of service quality, it is expected to increase patient satisfaction which will later be related to patient loyalty, so that the patient does not hesitate to come and seek treatment again when necessary (Fatima et al. 2018, Wahyuni et al. 2019).

Siloam Hospital Surabaya is a private hospital which is very concerned with patient satisfaction. The hospital has set the waiting time for drug services to be 15 minutes for all medications both concoction and ready-made drugs. This sometimes encounters obstacles

proven to never reach 100% of satisfaction in terms of waiting time for drugs in pharmacy. However, such results have increased during the observation period of three months.

Long waiting period has been found stressful for patients for a long time and thus appears to be a clear potential source of patient dissatisfaction. Many studies have demonstrated a clear opposite association of patient satisfaction with waiting time (Kreitz et al. 2016, Michael et al. 2013). Patient satisfaction is an significant indicator of the quality of health care facilities (Ganasegeran et al. 2015; Belay, et al, 2018)

Waiting time is a sensitive matter in the sense of that it can caused the decrease of health services quality in pharmacy unit (Afolabi et al. 2005). Inefficient waiting time can cause patients dissatisfaction towards the health service obtained from a pharmacy unit. On previous study, patients waiting time to receive health services at pharmacy unit can degrade their quality of life even allowing a lower life expectancy (Leddy et al. 2003). The purpose of this paper was to analyze drug

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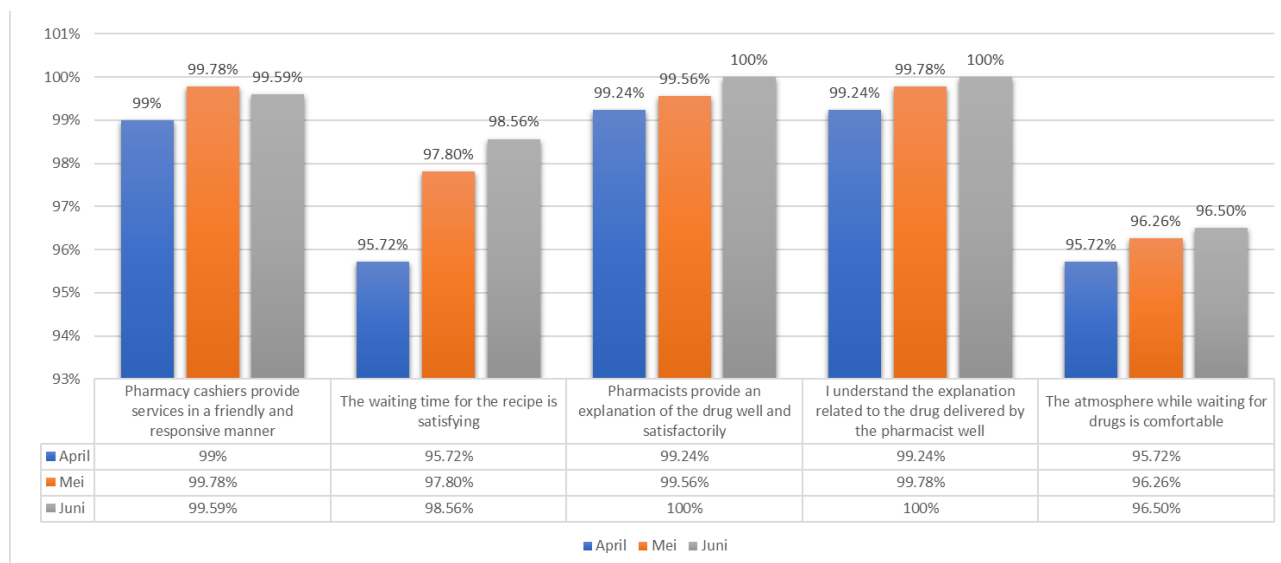


Fig. 1. Number of outpatient in pharmacy patients

waiting time has a relationship with patient satisfaction in the pharmaceutical department, especially for the outpatients.

METHODS

This was an observational descriptive study through cross-sectional study design in which data collection for this study was carried out using questionnaire as a means to determine the level of patient satisfaction in the outpatient pharmacy department.

In this study, there were 1338 respondents divided into 3 months of observation. The amount of 1338 was the total number of outpatient pharmacy patients who filled out the questionnaire and conducted pharmaceutical transactions from outpatient.

For outpatient prescription services, the time was calculated starting from when the patient submitted the prescription received from the doctor to the pharmacy officer or when the patient transacted (e-prescription), after that the patient could sit and waited until the patient's name was called (Kementerian Kesehatan 2008). After getting the medication from the pharmacy officer, the patient received education about the drug received, including the procedures for the use of the drug, the rules of use, and obtained a questionnaire to be filled out and submitted to the pharmaceutical officer.

The observation period for this research was in April, May, and June. It was based on observations every 3 months. Thus, it can be known whether the aspects to be achieved can be realized, including compliance with officers that can be observed through the questionnaire. The data were processed using SPSS 22 program.

RESULTS

This study used questionnaire consisting of 5 questions with a variation of 4 answers (strongly agree,

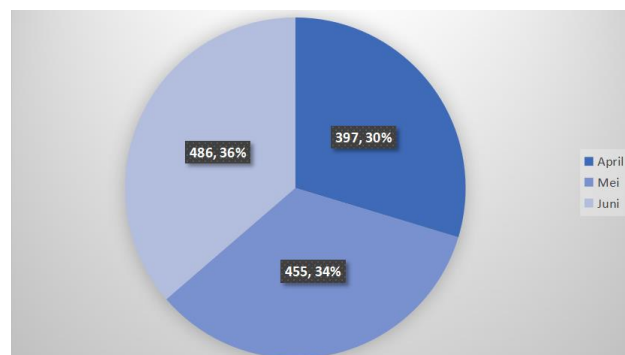


Fig. 2. Questionnaire time analysis and satisfaction of outpatient at the pharmacy section

agree, disagree, strongly disagree) with a total number of respondents of 1338 (Figure 1).

All prescriptions evaluated in this study were the total number of patients who transacted in the outpatient pharmacy, either general patients, personal insurance, or patients using National Health Insurance (BPJS). In April 2019, 23% of patients used BPJS, and 77% did not use BPJS. In May 2019, 18% of patients used BPJS, and 82% did not use BPJS. In June 2019, 16.5% of patients used BPJS and 83.5% did not use BPJS.

Through the graph in Figure 2, it can be seen that there was an increase in patients' satisfaction in the outpatient pharmacy department regarding the waiting time of the drug, followed by several other factors, including pharmacists' compliance in explaining the procedures for the use of medications prescribed by doctors. The graph also shows an increase in the number of patients who transacts in outpatient pharmacy, indicating the patient's trust or loyalty to the pharmaceutical installation at Siloam Hospital in Surabaya. In order to maintain this aspect, for each indicator listed in the questionnaire included in the Individual Key Performance (KPI) of each staff in

accordance with the duties and responsibilities, an assessment was conducted every 6 months for all staff that was carried out by the head of each department. The results of the KPI staff evaluation was used to determine staff standards and to evaluate the work of the staff concerned.

DISCUSSION

According to the Indonesia Minister of Health regulation 129 of 2008 about minimum standards of hospital service, the waiting time for pharmaceutical services in this study is calculated from the time the patient submits the prescription to receiving the drug (Kementerian Kesehatan 2008). Based on the diagram, it can be seen that there are several factors that can influence patient satisfaction other than waiting time for receiving drugs, this can be seen in question No. 1 about friendly service, apparently, and friendly service must also be directly proportional to the waiting time of pharmacy in outpatient care. It means that the more we provide friendly service, the faster the acceptance of drugs, thus it will lead to service satisfaction (Harahap et al. 2016, Tome et al. 2019). This results supported by previous research that to achieve consumer satisfaction, it is critical to first examine the customers' perceptions of service quality, understand related characteristics or dimensions to measure service and product quality, and strengthen quality factors of concern to customers

(Chen et al. 2019, Octabriyantiningtyas et al. 2019). According to the results, we can also know the comparison of patients using BPJS and not using BPJS (using personal payment or personal insurance) in which the Siloam Hospital Surabaya does not distinguish the

time target between BPJS and non BPJS patients. Thus, the satisfaction data obtained was a combination of BPJS and non BPJS patients. This is inconsistent with some previous studies (Perez et al. 2009, Robyn et al. 2013).

Service quality influences the expectations and reality received. If the customer gets the service exceeds his/her expectations, the customer will say that the service is good and then develops into satisfaction with the service provider (Ali et al. 2015). Otherwise, if the customer feels the service provided is not in line with their expectations, the customer will say that the service quality is poor so that it will affect customer's satisfaction (Rahmadani et al. 2019, Tuami et al. 2018).

The result of this study showed that the patients just needed to wait less than 30 minutes to get their medicines. This result is similar with the previous study showing that outpatients were reasonably satisfied if they waited no more than 37 min when arriving on time (Huang 1994).

CONCLUSION

There was an increase in patient satisfaction in the outpatient pharmacy department regarding the waiting time of the drug which is followed by several other factors, including pharmacists' compliance in explaining the procedures for the use of medications prescribed by doctors. The patients' loyalty in the pharmaceutical system at Siloam Hospital Surabaya is reflected in the number of patients who transact in outpatient pharmacy. Effective health care administration does not guarantee the trust of customers.

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